SCHEDULE B (FEC Form 3X)

SCILDOLL B (I LOI OIII 3A)	Use seperate schedule(s)	(check		IUMBER	:	P	PAGE 25/32			
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21k			X 23 28b	24 28c	\Box	25 29	26	
Any Information copied from such Reports and Statemers or for commercial purposes, other than using the name										
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	and address or any political co	minnitee to	SOIIC	it COHIHD	ulions if	JIII SUCI	COHIM	illee		_
American Academy of Ophthalmology Inc F	Political Committee (OPH)	ГНРАС)								
Full Name (Last, First, Middle Initial)				Transac	ction ID:	975611	10603	0136	1302	1
A. Michael Burgess for Congress					Disburse / D		v v		V	
Mailing Address PO Box 2334				0 _M 3 _M	0	1 /	2 (o ŏ e `		
	State Zip Code FX 76202			Amount	of Each	Disburse	ement	this Pe	eriod	
Purpose of Disbursement	70202		1				15	500.00	0	
2006 Primary Candidate Name Category/										
Burgess Michael	'	Category/ Type								
Office Sought: X House Disburser										
Senate X President	Primary General Other (specify) ▼									
State: TX District: 26										_
Full Name (Last, First, Middle Initial) Nike Thompson for Congress					ction ID:	347173	30603	0949	32660)
				M M M	/ D	0 /	YYY	0 Ó 6	Y	
Mailing Address 5429 Madison Avenue				0 3	<u> </u>	U	2 (000		
,	State Zip Code CA 95841			Amount	of Each	Disburse	ement	this Pe	eriod	
Purpose of Disbursement							15	500.00	0	
2006 Primary Candidate Name		Category/	1							
Thompson Mike		Type								
Office Sought: X House Disburser Senate X	nent For: 2006 Primary General									
President	Other (specify) ▼									
State: CA District: 01 Full Name (Last, First, Middle Initial)								<u> </u>		_
Pull Name (Last, First, Middle Initial) National Republican Congressional Committee					ction ID: Disburse	: 312204 ement	10603	U136	8875	3
Mailing Address 320 First Street				0,3	[′] D0	1 /	ž	o ŏ e `	Y	
,	State Zip Code DC 20003			Amount	of Each	Disburse	ement	this Pe	eriod	_
Purpose of Disbursement 2006 Contribution			1				50	00.00	0	
Candidate Name		Category/ Type	1							
President	nent For: Primary General Other (specify)									
State: District:										_
SUBTOTAL of Disbursements This Page (optional)			<u> </u>				80	00.00	0	
TOTAL This Period (last page this line number only)			•							